

### **July 2002**

To submit information, update, or ask questions, please contact Audrey Smolkin at 215-861-4794 or by e-mail at: asmolkin@hrsa.gov



### LATE BREAKING NEWS

### Greetings!

Thanks again to all who participated in the CAP conference and made it such a success! Some program notes are below:

**CONFERENCE**: If you have any materials to share from presentations during the conference, please email them to Gladys Cate (gcate@hrsa.gov) with your name and the name of your session. She will keep them in a database available to grantees by request.

**SIX MONTH PROJECT UPDATES**: Six-month project updates with a reporting period of September 2001 - February 2002 are due on July 31, 2002. Primary contacts should have received the necessary templates by June 21, 2002. If anyone did not receive a template, please contact Teresa Brown (tbrown@hrsa.gov).

**FY2002 CONTINUATION FUNDING**: Continuation funds applications are due by July 8, 2002. Grantees should submit a copy of their applications to the address listed on the grant application itself. It is also requested that grantees submit an EXACT replica of the copy to capcentraloffice@hrsa.gov for easier review and distribution. Any questions can be emailed to capcentraloffice@hrsa.gov.

**PRIMARY CONTACTS**: CAP maintains one list of primary contacts per each grantee community. PLEASE make sure this list includes your best primary contact by going to www.capcommunity.hrsa.gov, clicking on forms, and updating the information for your grant. We will be sending out a great deal of policy and grant-related information to that one contact person only, so please select a person that will share the materials throughout the grantee community quickly and effectively.

**CAP WEBSITE**: The CAP website is now password protected. Grantees may contact their primary contact to receive the password.

**TA RESOURCES**: As we mentioned at the conference, CAP has significantly added to our TA resources. Please be in touch to access these resources for consultants, travel, and more. Email can be sent to asmolkin@hrsa.gov.

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**UPCOMING TA CALLS**: We are interested in having a TA Call on telepharmacy/telemedicine issues. If you are interested in volunteering to be on the call (or have other call suggestions) please contact me at <a href="mailto:asmolkin@hrsa.gov">asmolkin@hrsa.gov</a>.

Thanks!

Audrey



### **CAP TA CALLS**

#### **Technical Assistance Calls**

Technical assistance calls for grantees continue to be held every other Tuesday from 2 to 3 PM EDT. The schedule for July appears below. To register, search for summaries or materials from prior calls, and download materials for upcoming calls, please go to CAP website (<a href="www.capcommunity.hrsa.gov">www.capcommunity.hrsa.gov</a>). Once you register for the call, please be sure to download the materials that will be used during the call. You should immediately receive a confirmation note by email that includes the call-in number for the call. If you have difficulty registering or do not receive the call-in number, please contact scampbell@mac1988.com or call 301-468-6006 ext. 437.

CAP TA Calls	
Date	Topic
July 9	Six Month Project Update
	This call will focus on the Six Month Project Update, the monitoring tool used by the Community Access Program. Teresa Brown, CAP Evaluation Coordinator, will provide additional instructions regarding the completion of the forms and respond to questions from grantees. The call will also include a brief discussion about the logic model.
	All Six Month Project Update templates were sent to the primary and evaluation contacts for each community by June 21, 2002. Contact Teresa Brown (tbrown@hrsa.gov) if your primary contact person did not receive the template.
July 23	Measuring Health Status in Your Community
	Teresa Brown, CAP Evaluation Coordinator, and experts in the field of measuring health status, will host a call on this important topic. More details and agenda will be provided as they become available.

With the exception of calls related to legal issues, many TA calls are summarized and posted on the CAP website. Legal issue briefs are posted on the site under legal issues and require a password, which may be obtained by emailing scampbell@mac1988.com. You may also request an audiotape copy of any previous calls (up to one month after the call) by contacting scampbell@mac1988.com.

### GRANT OPPORTUNITIES AND AWARDS

### **SAMHSA Offers Training Grants**

The Substance Abuse and Mental Health Services Administration (SAMHSA) is offering Workforce Training Grants that can be used to develop, implement, and evaluate training programs that will increase mental health workers' ability to provide culturally appropriate services to racial and ethnic minorities. Approximately \$1.6 million will be available to fund up to four grants. State and local governments are eligible applicants. For more information, contact Kano Enamoto at 301-443-9324 or kenamoto@SAMHSA.gov.

### **State Innovation Grants Available**

Deadline: July 23, 2002

The HHS Office of the Assistant Secretary for Planning and Evaluation is inviting state agencies to submit competitive grant applications for financial assistance in order to plan for, or implement, innovative approaches for effective health and human services delivery. Demonstration grants and planning grants are available. Approximately \$2.5 million is expected to be available for fiscal year 2002. Applications are due by July 23, 2002. For more information, visit http://aspe.hhs.gov/state-innov-grants.htm.

#### **More State Grants from HHS**

Deadline: July 31, 2002

The U.S. Department of Health and Human Services (HHS) recently announced a competitive grant program that will provide funding for states to design or demonstrate innovative models for delivering health care, long-term care and/or human services to low-income adults, families, and children. The grants are intended to be used to highlight new approaches and to stimulate innovation among other states.

Two types of grants will be awarded: up to six demonstration grants of up to \$500,000 each and 5 to 10 planning grants ranging from \$25,000 to \$50,000 each. States may apply for both types of grants, and more than one state agency may apply. Applications are due by July 31, 2002, with awards to be announced in September. For more information, visit http://aspe.hhs.gov/funding.htm.

#### **Grants Available from VIH**

Deadline: August 9, 2002

Volunteers in Health Care (VIH), a national non-profit resource center funded by the Robert Wood Johnson Foundation, is issuing a call for proposals for the creation of projects that enhance care for uninsured/underserved patients through cooperative relationships among dental and medical clinicians. Models that involve private sector clinicians are of particular interest at this time. The applicant organization must be a non-profit or government agency, although partner organizations may be for-profit.

Applicants must either currently use volunteer clinicians or provide evidence that they will be partnering with an organization that currently uses volunteer clinicians. One-year grants of up to \$30,000 will be awarded, with a 50 percent match required. VIH funding will support the costs of designing, planning, and implementing innovative programs to link medical and dental care. Funds may be used to identify partners, bring partners together (e.g. meeting costs), recruit/retain physicians and dentists, fund administrative staff time and equipment, evaluate progress, etc.

Letters of Intent are due by August 9, 2002. The final grant application is due September 13, 2002. To view the entire RFP, guidelines, and additional information, visit the VIH website at http://www.volunteersinhealthcare.org or call 1-877-844-8442.

#### **Rural Grants Available**

The Health Resources and Services Administration (HRSA) recently posted Grant Guidance Documents for the Rural Health Outreach and Rural Health Network Development Programs. These grants are aimed at "expanding access to, coordinating, restraining the cost of, and improving the quality of essential health care in rural areas." To apply, request the application package from the HRSA Grant Application Center (HRSA GAC) at 1-877-477-2123, FAX 1-877-477-2345. Preapplication technical assistance calls are planned for July 24th and 31st. For more information, please visit http://ruralhealth.hrsa.gov/funding/#providers.

### **CDC Funding Available**

The Office on Women's Health of the Centers for Disease Control and Prevention (CDC) recently announced funding for a cooperative agreement to plan and implement state initiatives addressing Violence Against Women (VAW). The program consists of two parts: Planning and Implementation. The first part, Planning, is designed to help recipients conduct an assessment of the state's current VAW prevention and intervention efforts and to develop a statewide action plan.

The second part, Implementation, is designed to support recipients who have already developed an action plan that addresses VAW (under CDC Program Announcements 99136 and 00119) to implement priority activities from their action plans. Approximately \$1.5 million is available in FY 2002 to fund approximately 29 grants under each part. The application deadline is July 12, 2002. For more information, visit http://www.cdc.gov/od/pgo/funding/02125.htm.



### **GRANTEE NEWS**

# National Recognition for CAP Grantee

Becky Rayman of the Columbus, Nebraska CAP project has been nominated to the National Association of County and City Health Officials (NACCHO) MAPP (Mobilizing for Action through Planning and Partnerships) workgroup. The nomination came after Dr. Paul Erwin from the Tennessee Department of Health witnessed the progress made on MAPP in Columbus during a recent site visit. The MAPP Work Group oversees activities related to NACCHO's MAPP tool, a community-wide strategic

planning tool designed to support program implementation, technical assistance, training, demonstration site testing, marketing, evaluation, aligning with other community health improvement efforts, and building the learning community. Acknowledgement of Ms. Rayman's work as a CAP Grantee demonstrates the leadership roles CAP grantees are increasingly assuming across the country to support better access to quality health care. CONGRATULATIONS, Becky and Company!



### CONFERENCES, PROGRAMS, AND OTHER NEWS

### Third Annual Advanced Service-Learning Institute

Community-Campus Partnerships for Health (CCPH) recently announced its Third Annual Service-Learning Institute, to take place February 1-4, 2002 in San Jose, California. The Institute is designed to support academic administrators, faculty, staff and community partners who have already implemented servicelearning courses or programs. Daily interactive workshops and small group sessions will be held to discuss strategies for effective servicelearning. Applications for the workshop are due by December 2, 2002. Interested parties may print applications from the CCPH website at http://futurehealth.ucsf.edu/ccph/servicelearning. html#advsl or call the CCPH fax-on-demand service at 1-888-267-9182 and request document #206.

# **Depression Screenings in Primary Care**

The U.S. Preventive Services Task Force (USPSTF) recently found sufficient evidence to encourage primary care clinicians to screen adult patients for depression. Clinicians are encouraged to establish systems that ensure accurate diagnosis, effective treatment, and thorough follow up care. To view the complete recommendation, visit http://www.ahrq.gov/clinic/3rduspstf/depression/.

#### Free Items Available from Lowe's

Gifts In Kind International recently announced a new donation program from Lowe's stores nationwide. Lowe's is making a one-time donation of products that include coat/hat hooks and cabinetry hardware. Qualified 501(c)(3)

organizations may obtain the items for community re-building, daycare facilities, senior centers, pre-schools, medical facilities, hospitals, and homeless shelters. Pick-ups will be available through July and August. There is a one-time administration fee of \$50 per store. For more information or to register with Gifts In Kind International, visit http://www.giftsinkind.org.

### REPORTS AND ISSUE BRIEFS

### **HHS Focuses on Women's Health**

HHS Secretary Tommy G. Thompson recently announced the release of *Women's Health USA 2002*, a new statistical report on women's health compiled by HRSA. The report highlights current and historical data on the most pressing health challenges facing women and their families. Data are provided in three categories: population characteristics, health status, and health services utilization. According to the report, women's life expectancy reached a new record in 2000 of 79.5 years. Reported data also indicated that more women than ever before are receiving prenatal care, and that nearly 87 percent of women have health insurance coverage.

The full report is available online at http://mchb.hrsa.gov/data/women.htm. Free hard copies are also available from the HRSA Information Center at 1-888-ASK-HRSA.

### **Health Care Quality Chartbook**

The Commonwealth Fund recently released "Quality of Health Care in the United States: A Chartbook," which demonstrates the state of health care quality in the United States and documents gaps in quality of health care. The Chartbook features 54 charts with analyses that highlight serious gaps on a number of quality measures. It is organized into six chapters: 1) Effectiveness; 2) Patient safety; 3) Access and timeliness; 4) Focus on the patient; 5) Disparities in health care; and 6) Capacity to improve.

The Chartbook makes recommendations on how to improve the quality of health care in the country. It is available online at http://www.cmwf.org/programs/pub\_highlight.a sp?ID=1&CategoryID=3 or can be ordered by calling 1-888-777-2744.

#### **Welfare Reform Resources**

The Urban Institute's Assessing the New Federalism (ANF) Project recently released two new resources on welfare reform. The first, "Ten Things Everyone Should Know About Welfare Reform," presents summary information on: the welfare caseload; work and earnings; work support programs; poverty and child well being; family structure; and population subgroups. The report draws on data from ANF research, including an analysis of the National Survey of America's Families, the Welfare Rules Database, and site visit findings. It can be found online at http://www.urban.org/ViewPub.cfm?PubID=310484.

The second resource presents basic data from The National Survey of America's Families and the Welfare Rules Database in a useable format. "Fast Facts on Welfare Policy" contains multiple charts and tables, each with a summary paragraph about the findings and how the findings inform policy debate. Summaries include: rules and regulations of major programs that serve low-income families; work status of welfare leavers; and how Temporary Assistance for Needy Families (TANF) funds are spent. The report is available at http://www.urban.org/pubs/welfare\_reform/Fast Facts.html.

# IOM and Kaiser Commission Study the Uninsured

The Institute of Medicine (IOM) and the Kaiser Commission on the Uninsured recently released two new reports detailing the consequences of being uninsured. The IOM study, "Care Without Coverage: Too Little, Too Late," examines evidence contrasting the health of insured and uninsured adults. The report finds that uninsured adults between the ages of 25 and 64 are 25 percent more likely to die prematurely

than adults with insurance. Uninsured individuals are also less likely to receive appropriate care such as cancer screening tests and care for chronic diseases. The report is second in a planned series of six studies investigating the U.S. health system. The full report is available at http://www.nap.edu/books/0309083435/html.

The Kaiser Commission report, "Sicker And Poorer: The Consequences of Being Uninsured," evaluates thousands of citations and research articles to assess the consequences of being uninsured in terms of health status and economic opportunity. The report synthesizes major findings of the past 25 years of health services research on the most important effects of health insurance. According to the report, uninsured individuals receive less preventive care, are often diagnosed at more advanced disease stages, and often receive less therapeutic care after diagnosis. To view the entire report, go to http://www.kff.org/content/2002/20020510.

# Resources for Expanding Access to Care

The Robert Wood Johnson Foundation's State Coverage Initiatives program recently made available several new resources to support state efforts to expand access to health care. The resources include a new Issue Brief entitled, "State Health Care Spending: A Systems Perspective"; an updated library of 350 health policy reports in a searchable database; and an updated State Coverage Matrix which recently has been modified to include the Administration's new Health Insurance Flexibility and Accountability (HIFA) waivers. All of the new resources are available online at http://www.statecoverage.net/whatsnew/index. htm.

# Data Book Notes Improvement in Children's Health

The Annie E. Casey Foundation recently released its 2002 Kids Count Data Book, which provides state-by-state data on 10 key indicators of child well-being from 1990 to 1999. The Data Book compares the percentage of children without insurance in individual states to the national rate. Of the 10 indicators examined, seven showed improvement, two showed further deterioration, and one remained unchanged. The report lists several key findings, including declines in infant mortality and child poverty

rates. All data from the 2002 Kids Count Data Book are available in an online database that allows users to generate custom graphs, maps, ranked lists, and state-by-state profiles. The entire Data Book is also available for downloading. Visit http://www.aecf.org/kidscount/kc2002 for more information.

### **Report Outlines Health Disparities**

The W.K. Kellogg Foundation recently released "A Poor Man's Plight: Uncovering the Disparity in Men's Health," a report that examines the health status of Black, Hispanic, Asian/Pacific Islander, Native American, and mixed-race men of color. The report details 12 strategies to overcome the obstacles these men face when trying to access appropriate health care. Recommended strategies include: expanding health insurance coverage; establishing more accessible points of entry to the health care system; and increasing the availability of community-based screening, outreach, and care coordination services. The full report is available at http://www.communityvoices.org/PDF/Mens Health.pdf.

# NGA Tracking Trends in Maternal and Child Health

The National Governors Association (NGA) recently released its "MCH Update," which annually tracks trends in state health insurance coverage of pregnant women, children, and parents. The publication highlights changes in enrollment and eligibility for the State Children's Health Insurance Program (SCHIP) and Medicaid, two of the largest providers of health insurance and health coverage to these lowincome populations. In FY 2001, SCHIP covered more than 4.6 million children and Medicaid covered more than 20 million children. In 1999, Medicaid paid for more than one-third of births in the United States. Copies of the report are available at http://www.nga.org/ center/divisions/1,1188,C ISSUE BRIEF^D 37 72,00.html.

NGA also released a new issue brief entitled, "Enrollment Hits the Web: States Maximize Internet Technology in CHIP and Medicaid." The brief examines the ways the Internet has streamlined CHIP and Medicaid enrollment. Recent findings indicate that states believe use of the Internet for enrollment reduces program enrollment time, increases access to

applications, and centralizes social service applications in state governments. The full brief is available at http://www.nga.org/ center/divisions/1,1188,C\_ISSUE\_BRIEF^D\_3840,00. html

### **Innovative Ways to Improve Access**

Reaching Out: Successful Efforts to Provide Children and Families with Health Care is a new report offered by the Economic and Social Research Institute. The report provides community workers and policymakers with an inventory of ideas and resources to improve enrollment rates and help more people access essential health care services.

Community Voices: HealthCare for the Underserved is the primary organization featured in the report. It has managed to enroll difficult to reach uninsured populations using innovative outreach strategies like complimentary fruit baskets and Beanie Babies. Community Voices also enlists community residents to participate in the outreach process and to educate the public through community events such as health fairs and street festivals. Bi-lingual outreach workers have been able to reach many immigrants who were once fearful of government-funded health programs. For more information or to download a copy of

the report, visit the Community Voices website at http://www.communityvoices.org.

### Two New Reports from Kaiser Commission

The Kaiser Commission on Medicaid and the Uninsured recently released two new reports detailing states' experiences in increasing enrollment in Medicaid and CHIP programs. The first report, "Enrolling Children and Families in Health Coverage: The Promise of Doing More," discusses how many states have increased their numbers of CHIP beneficiaries by simplifying enrollment procedures through shorter applications, removal of asset tests, and allowing enrollment forms to be submitted by mail without a face-to-face interview.

The second report, "Reaching the Uninsured Through Medicaid: If You Build It Right, They Will Come," demonstrates how states that have eliminated barriers to enrollment in Medicaid and CHIP have successfully increased the percentage of low-income residents supported by these programs. Typical barriers cited included restrictive policies, lack of information about Medicaid eligibility, and burdensome enrollment and retention procedures. Both reports are available online at http://www.kff.org/content/2002/20020611.

### **WEB RESOURCES**

# MSH and BPHC Expand Provider's Guide

Management Sciences for Health (MSH) and the Bureau of Primary Health Care (BPHC) recently expanded "The Provider's Guide to Quality and Culture" to include information on Arab Americans, Central Asians, South Asians, and Muslims. These new sections add to the previous information provided on African Americans, Asian Americans, Hispanics, Latinos, Native Americans, and Pacific Islanders.

The guide includes detailed sections for each group including: Strengths and Protective Factors; Challenges to Health and Well-Being; and Principles for Culturally Competent Health Services. References and additional links are also provided. The guide is available at http://erc.msh.org/mainpage.cfm? file=5.0.htm&module=provider&language= English.